

PTO/SB/83 (03-02)

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	09/606,555
Filing Date	6/29/00
First Named Inventor	Peter H. Seckel
Group Art Unit	1772
Examiner Name	Loney, Donald J.
Attorney Docket Number	7954/1

To: Assistant Commissioner for Patents
Washington, DC 20231

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

Client requested withdrawal as counsel — See attached letter.

1. The correspondence address is NOT affected by this withdrawal.
2. Change the correspondence address and direct all future correspondence to:

CORRESPONDENCE ADDRESS

<input type="checkbox"/>	Customer Number	<input type="text"/>	<input type="checkbox"/>	Place Customer Number Bar Code Label here
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<input type="checkbox"/> Firm or Individual (initials)	Peter H. Seckel - Seckel
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Address	Crane's Mill #315
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Address	459 Passaic Avenue
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City	West Caldwell	State	NJ	ZIP	07006-7464
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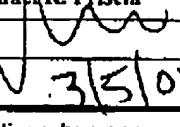
Country	USA
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Telephone	Fax
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- This request is made on behalf of myself and
 all the attorneys/agents of record,
 the attorneys/agents (with registration numbers) listed on the attached paper(s), or
 the attorneys/agents associated with Customer Number _____

This request is enclosed in triplicate (including any attachments).

Name	Michael R. Friscia
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Signature	
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Date	3/5/03
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NOTE: Withdrawal is effective when approved rather than when received.

Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

 APPROVED
 JACQUELINE M. STONE MAR 27 2003
 DIRECTOR
 TECHNOLOGY CENTER 1700